

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

ALAMEDA COUNTY TREASURER

1221 OAK ST

OAKLAND

CA 94612

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 4,170,016.97

Gross Claim \$4,170,016.97

Net Claim / Payment Amount \$4,170,016.97

YTD Amount: \$4,170,016.97

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

ALPINE COUNTY TREASURER
PO BOX 217

MARKLEEVILLE

CA 96120

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 106,309.06

Gross Claim \$106,309.06

Net Claim / Payment Amount \$106,309.06

YTD Amount: \$106,309.06

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

AMADOR COUNTY TREASURER
810 COURT ST

JACKSON

CA 95642

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 191,361.89

Gross Claim \$191,361.89

Net Claim / Payment Amount \$191,361.89

YTD Amount: \$191,361.89

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

BERKELEY CITY TREASURER

2081 CENTER STREET

BERKELEY

CA 94704

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 353,325.01

Gross Claim **\$353,325.01**

Net Claim / Payment Amount **\$353,325.01**

YTD Amount: **\$353,325.01**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

BUTTE COUNTY TREASURER

25 COUNTY CENTER DR

OROVILLE

CA 95965

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 682,045.16

Gross Claim **\$682,045.16**

Net Claim / Payment Amount **\$682,045.16**

YTD Amount: **\$682,045.16**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS

CA 95249

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 206,916.22

Gross Claim **\$206,916.22**

Net Claim / Payment Amount **\$206,916.22**

YTD Amount: **\$206,916.22**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

COLUSA COUNTY TREASURER
546 JAY ST

COLUSA

CA 95932

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 172,305.08

Gross Claim **\$172,305.08**

Net Claim / Payment Amount **\$172,305.08**

YTD Amount: **\$172,305.08**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

CONTRA COSTA COUNTY TREASURER
625 COURT ST RM 102

MARTINEZ

CA 94553

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,648,925.29

Gross Claim \$2,648,925.29

Net Claim / Payment Amount \$2,648,925.29

YTD Amount: \$2,648,925.29

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY

CA 95531

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 181,367.27

Gross Claim **\$181,367.27**

Net Claim / Payment Amount **\$181,367.27**

YTD Amount: **\$181,367.27**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

EL DORADO COUNTY TREASURER
360 FAIR LN

PLACERVILLE

CA 95667

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 474,028.66

Gross Claim \$474,028.66

Net Claim / Payment Amount \$474,028.66

YTD Amount: \$474,028.66

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

FRESNO COUNTY TREASURER
PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,868,227.85

Gross Claim \$2,868,227.85

Net Claim / Payment Amount \$2,868,227.85

YTD Amount: \$2,868,227.85

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS

CA 95988

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 182,347.50

Gross Claim **\$182,347.50**

Net Claim / Payment Amount **\$182,347.50**

YTD Amount: **\$182,347.50**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

HUMBOLDT COUNTY TREASURER
825 FIFTH ST RM 125

EUREKA

CA 95501

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 420,659.09

Gross Claim \$420,659.09

Net Claim / Payment Amount \$420,659.09

YTD Amount: \$420,659.09

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

IMPERIAL COUNTY TREASURER
940 WEST MAIN ST

EL CENTRO

CA 92243 2863

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 579,525.33

Gross Claim \$579,525.33

Net Claim / Payment Amount \$579,525.33

YTD Amount: \$579,525.33

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

INYO COUNTY TREASURER

PO BOX 0

INDEPENDENCE

CA 93526

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 122,988.14

Gross Claim \$122,988.14

Net Claim / Payment Amount \$122,988.14

YTD Amount: \$122,988.14

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO

CA 95798 1240

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,475,401.04

Gross Claim \$2,475,401.04

Net Claim / Payment Amount \$2,475,401.04

YTD Amount: \$2,475,401.04

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

KINGS COUNTY TREASURER
PO BOX 1406

SACRAMENTO CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 486,976.81

Gross Claim \$486,976.81

Net Claim / Payment Amount \$486,976.81

YTD Amount: \$486,976.81

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT

CA 95453

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 241,265.11

Gross Claim **\$241,265.11**

Net Claim / Payment Amount **\$241,265.11**

YTD Amount: **\$241,265.11**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE

CA 96130

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 181,653.99

Gross Claim \$181,653.99

Net Claim / Payment Amount \$181,653.99

YTD Amount: \$181,653.99

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

LOS ANGELES COUNTY TREASURER
PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 33,296,332.08

Gross Claim \$33,296,332.08

Net Claim / Payment Amount \$33,296,332.08

YTD Amount: \$33,296,332.08

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 510,039.63

Gross Claim **\$510,039.63**

Net Claim / Payment Amount **\$510,039.63**

YTD Amount: **\$510,039.63**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

MARIN COUNTY TREASURER

PO BOX 4220

CIVIC CENTER

SAN RAFAEL

CA 94913

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 660,763.31

Gross Claim **\$660,763.31**

Net Claim / Payment Amount **\$660,763.31**

YTD Amount: **\$660,763.31**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA

CA 95338

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 123,932.24

Gross Claim \$123,932.24

Net Claim / Payment Amount \$123,932.24

YTD Amount: \$123,932.24

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

MENDOCINO COUNTY TREASURER

501 LOW GAP RD 1060

UKIAH

CA 95482

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 293,522.74

Gross Claim **\$293,522.74**

Net Claim / Payment Amount **\$293,522.74**

YTD Amount: **\$293,522.74**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

MERCED COUNTY TREASURER
PO BOX 981311

WEST SACRAMENTO CA 95798 1311

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 858,187.25

Gross Claim \$858,187.25

Net Claim / Payment Amount \$858,187.25

YTD Amount: \$858,187.25

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

MODOC COUNTY TREASURER
204 COURT ST RM 101

ALTURAS

CA 96101

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 115,575.21

Gross Claim **\$115,575.21**

Net Claim / Payment Amount **\$115,575.21**

YTD Amount: **\$115,575.21**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

MONO COUNTY TREASURER
PO BOX 495

BRIDGEPORT

CA 93517

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 120,536.98

Gross Claim \$120,536.98

Net Claim / Payment Amount \$120,536.98

YTD Amount: \$120,536.98

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

MONTEREY COUNTY TREASURER
PO BOX 1406

SACRAMENTO CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,366,887.66

Gross Claim \$1,366,887.66

Net Claim / Payment Amount \$1,366,887.66

YTD Amount: \$1,366,887.66

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

NAPA COUNTY TREASURER

1195 THIRD ST RM 108

NAPA

CA 94559 3035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 392,682.29

Gross Claim **\$392,682.29**

Net Claim / Payment Amount **\$392,682.29**

YTD Amount: **\$392,682.29**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

NEVADA COUNTY TREASURER
PO BOX 128

NEVADA CITY

CA 95959

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 321,402.80

Gross Claim \$321,402.80

Net Claim / Payment Amount \$321,402.80

YTD Amount: \$321,402.80

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO

CA 95798 1024

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 9,474,944.78

Gross Claim **\$9,474,944.78**

Net Claim / Payment Amount **\$9,474,944.78**

YTD Amount: **\$9,474,944.78**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

PLACER COUNTY TREASURER

2976 Richardson Dr.

Auburn

CA 95603

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 795,849.90

Gross Claim **\$795,849.90**

Net Claim / Payment Amount **\$795,849.90**

YTD Amount: **\$795,849.90**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

PLUMAS COUNTY TREASURER
PO BOX 176

QUINCY

CA 95971

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 166,959.85

Gross Claim \$166,959.85

Net Claim / Payment Amount \$166,959.85

YTD Amount: \$166,959.85

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

RIVERSIDE COUNTY TREASURER

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO

CA 95812 4035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 6,077,310.45

Gross Claim **\$6,077,310.45**

Net Claim / Payment Amount **\$6,077,310.45**

YTD Amount: **\$6,077,310.45**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

SACRAMENTO COUNTY TREASURER
PO BOX 980264

WEST SACRAMENTO CA 95798 0264

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,745,830.91

Gross Claim \$3,745,830.91

Net Claim / Payment Amount \$3,745,830.91

YTD Amount: \$3,745,830.91

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

SAN BENITO COUNTY TREASURER

COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER

CA 95023

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 233,003.66

Gross Claim **\$233,003.66**

Net Claim / Payment Amount **\$233,003.66**

YTD Amount: **\$233,003.66**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

SAN BERNARDINO CO TREASURER
PO BOX 1859

SACRAMENTO CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 6,151,136.67

Gross Claim \$6,151,136.67

Net Claim / Payment Amount \$6,151,136.67

YTD Amount: \$6,151,136.67

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

SAN DIEGO COUNTY TREASURER
PO BOX 980304

WEST SACRAMENTO CA 95798 0304

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 9,552,656.96

Gross Claim \$9,552,656.96

Net Claim / Payment Amount \$9,552,656.96

YTD Amount: \$9,552,656.96

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

CA 95814 2920

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,164,088.44

Gross Claim \$2,164,088.44

Net Claim / Payment Amount \$2,164,088.44

YTD Amount: \$2,164,088.44

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

SAN JOAQUIN COUNTY TREASURER

PO BOX 981355

WEST SACRAMENTO

CA 95798 1355

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,968,960.64

Gross Claim **\$1,968,960.64**

Net Claim / Payment Amount **\$1,968,960.64**

YTD Amount: **\$1,968,960.64**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

SAN LUIS OBISPO COUNTY TREASURER
PO BOX 1149

SAN LUIS OBISPO CA 93406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 794,200.64

Gross Claim \$794,200.64

Net Claim / Payment Amount \$794,200.64

YTD Amount: \$794,200.64

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

SAN MATEO COUNTY TREASURER

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

Sacramento

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,901,878.32

Gross Claim **\$1,901,878.32**

Net Claim / Payment Amount **\$1,901,878.32**

YTD Amount: **\$1,901,878.32**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA CA 93102

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,353,783.33

Gross Claim \$1,353,783.33

Net Claim / Payment Amount \$1,353,783.33

YTD Amount: \$1,353,783.33

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

SANTA CLARA CO TREASURER
PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 5,357,629.53

Gross Claim \$5,357,629.53

Net Claim / Payment Amount \$5,357,629.53

YTD Amount: \$5,357,629.53

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ

CA 95061

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 860,374.99

Gross Claim \$860,374.99

Net Claim / Payment Amount \$860,374.99

YTD Amount: \$860,374.99

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 565,835.89

Gross Claim \$565,835.89

Net Claim / Payment Amount \$565,835.89

YTD Amount: \$565,835.89

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

SIERRA COUNTY TREASURER

PO BOX 376

DOWNIEVILLE

CA 95936 0376

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 108,605.20

Gross Claim \$108,605.20

Net Claim / Payment Amount \$108,605.20

YTD Amount: \$108,605.20

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

SISKIYOU COUNTY TREASURER
311 FOURTH ST RM 104

YREKA

CA 96097

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 201,870.53

Gross Claim \$201,870.53

Net Claim / Payment Amount \$201,870.53

YTD Amount: \$201,870.53

For assistance, please call: John Bodolay at (916) 323-2154

8/8/2013

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

SOLANO COUNTY T TC
675 TEXAS ST STE 1900

FAIRFIELD

CA 94533 6337

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,179,781.20

Gross Claim **\$1,179,781.20**

Net Claim / Payment Amount **\$1,179,781.20**

YTD Amount: **\$1,179,781.20**

For assistance, please call: John Bodolay at (916) 323-2154

8/8/2013

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO

CA 95812 1204

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,325,604.89

Gross Claim \$1,325,604.89

Net Claim / Payment Amount \$1,325,604.89

YTD Amount: \$1,325,604.89

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

STANISLAUS COUNTY TREASURER
PO BOX 3052

MODESTO

CA 95353 3052

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,502,488.26

Gross Claim \$1,502,488.26

Net Claim / Payment Amount \$1,502,488.26

YTD Amount: \$1,502,488.26

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

SUTTER COUNTY TREASURER
PO BOX 546

YUBA CITY CA 95992

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 557,203.79

Gross Claim \$557,203.79

Net Claim / Payment Amount \$557,203.79

YTD Amount: \$557,203.79

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF

CA 96080

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 233,863.84

Gross Claim \$233,863.84

Net Claim / Payment Amount \$233,863.84

YTD Amount: \$233,863.84

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

TRI CITY MENTAL HEALTH
2008 N GAREY AVENUE

POMONA

CA 91767

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 649,788.45

Gross Claim **\$649,788.45**

Net Claim / Payment Amount **\$649,788.45**

YTD Amount: **\$649,788.45**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

TRINITY CO TREASURER

PO BOX 1297

WEAVERVILLE

CA 96093 1297

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 120,082.41

Gross Claim \$120,082.41

Net Claim / Payment Amount \$120,082.41

YTD Amount: \$120,082.41

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

TULARE COUNTY TREASURER
COUNTY CIVIC CENTER RM 103E
221 SOUTH MOONEY BL
VISALIA CA 93291

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,422,588.34

Gross Claim \$1,422,588.34

Net Claim / Payment Amount \$1,422,588.34

YTD Amount: \$1,422,588.34

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA

CA 95370

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 223,486.91

Gross Claim \$223,486.91

Net Claim / Payment Amount \$223,486.91

YTD Amount: \$223,486.91

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A

PAYMENT ISSUE DATE: 08/15/2013

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO

CA 95798 0307

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 **To** 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,426,802.08

Gross Claim **\$2,426,802.08**

Net Claim / Payment Amount **\$2,426,802.08**

YTD Amount: **\$2,426,802.08**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300010A
PAYMENT ISSUE DATE: 08/15/2013

YOLO COUNTY TREASURER
PO BOX 1995

WOODLAND

CA 95695

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 07/01/2013 To 07/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 633,326.15

Gross Claim \$633,326.15

Net Claim / Payment Amount \$633,326.15

YTD Amount: \$633,326.15